

Bulkley (L. D.)

ON
DIET AND HYGIENE
IN
DISEASES OF THE SKIN,

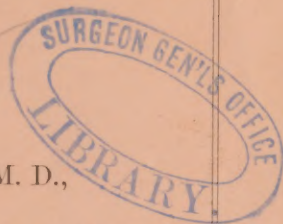
BY

L. DUNCAN BULKLEY, A. M., M. D.,

Fellow of the New York Academy of Medicine; Physician to the Skin Department Demilt Dispensary, New York; Attending Physician for Skin and Venereal Diseases at the Out-Patient Department of the New York Hospital, etc.

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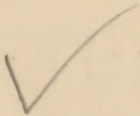


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of L. D. Bulkley M.D.*

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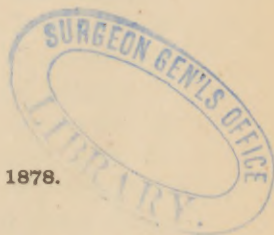


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To those who look upon diseases of the skin as entirely separated from those of the general economy, and consider only the local lesions and their local pathology, regarding the skin as idiopathically affected, mainly, if not entirely, by external causes, the subject of diet and hygiene in these diseases has little of interest. But to those who take a broader view of cutaneous physiology and pathology, and remember that the skin is but part of the general economy, subject to changes in disease, quite similar to those affecting the rest of the body, and further, that it is in active sympathy with the general system, and also that its diseases are subject to like causes as those of any other organ, the subject of diet and hygiene in affections of the skin is one of very great and practical interest.

The question is continually asked the physician whether it makes any difference what the patient eats or drinks who is affected with this or that skin disease, and the opinions given

are often as numerous as the physicians giving them, and are not infrequently quite contradictory; many are based on theory, many on popular opinion, which has sanctioned this and decried that article of food or drink, and seldom can a good reason be given for the rules prescribed. Much the same may be said of hygiene, to which, indeed, far too little attention is paid by the physician. The object of the present paper is to endeavor to direct thought to the subject, to give the basis upon which rules may be established, and to communicate in brief what clinical experience has taught me to be of importance in regard to diet and hygiene in daily dealing with diseases of the skin. First, of diet:

Dieting, to the popular mind, represents a starvation process, which is to be continued for a longer or shorter time with the view, as it were, of starving out a disease; the definition in Webster of the verb diet, is "to eat and drink sparingly or by prescribed rules." In the present paper the word diet has a broader meaning and signifies such a regulation of the quantity and quality of the food and drink taken, its mode of preparation, and time and method of consumption, as shall conduce to the restoration and maintenance of health. Under hygiene I include all other elements of daily life affecting the health and well being of the patient—exercise, bathing, mode of life, habitation, hours of work, sleep, etc.

That articles of diet have a direct effect upon the skin for good or evil, I think there can be no doubt in the minds of those who have given any thought to the subject. All are more or less familiar with the acute erythema or urticaria resulting in some persons from the ingestion of certain forms of fish, particularly shell fish; also occasionally from strawberries, bananas, etc. Some individuals are so constituted that whenever these are partaken of, the eruption will appear, while many others are thus affected only when the articles are stale, or when they, themselves, are in a peculiarly susceptible condition. It is also well known that buckwheat calls forth a pustular eruption, an acne in some persons, and the crops of acne which follow gross indiscretions in diet, as the partaking largely of fruit cake, mince pie, sausages, cheese, nuts, etc., are of daily observation on all sides. We also re-

call the eruptions produced by the internal administration of some articles which are used as drugs, copaiba, belladonna, quinia, iodide and bromide of potassium, etc. The skin lesions occasioned by all of these are transitory affairs, very evidently dependent upon the causes mentioned, disappearing, as a rule, spontaneously when the cause ceases to act.

Now, just as these acute disorders of the skin are produced by acutely acting dietary causes, so a chronic error in diet can and often does induce or at least keep up a more chronic cutaneous lesion, which of necessity will return as often as a conjunction of causes acts with sufficient force.

The most evident and well recognized association of dietary error and a chronic lesion of the skin is in the case of scorbutus, where the hæmorrhagic tendency in the tissue of the skin and other organs is plainly due to a deficiency in the vegetable portion of the diet. Again, purpura hæmorrhagica has been ascribed, with some probability, to the excessive habitual use of water.* A but little recognized, although important alimentary cause of skin lesions is the use of alcohol, which has been shown by Renault† to be a most powerful cause of the appearance of the late cutaneous manifestations of syphilis, as well as of other affections of the skin.

Recognizing, then, that ingesta may have very definite powers in calling forth eruptions on the skin, let us consider for a moment in what manner they act. First, they may have a direct irritating action on the stomach intestines, giving rise to reflex cutaneous irritation, resulting in erythema and urticaria, as in the eruptions from shell fish, strawberries, etc., which eruptions sometimes vanish very promptly when the offending mass is rejected from the stomach, or removed by purgation; second, they may act directly upon the skin tissues, as is sometimes the case when ergoted rye is eaten, causing certain skin lesions; alcohol, also the bromides and iodides probably act in this manner; third, articles of diet may produce indigestion, giving rise to the products of imperfectly elaborated material, having direct irritating effect

*Charles Hooker, Report on the Diet of the Sick. *Transactions Amer. Med. Association*, 1853.

†Essai sur l'influence de l'alcolism, etc. Thèse. de Paris, 1874.

in its circulation through the capillaries, as in the acne following buckwheat, cheese, sweets, etc., where, if they are taken in moderate quantity, no ill result may follow, but over-indulgence, followed by acidity, gives rise to the eruptions; fourth, the error in diet may consist in the absence of certain elements of food, as in the case of scorbutus, and also in strumous eczema, in which latter, a supply of fatty matter will often alone restore the healthy condition.

Now, I believe that in many diseases of the skin the character of the diet employed acts in one or the other of these ways, and that it is not an unimportant matter as to what food and drink the patients take, but that these affections are oftentimes very much influenced for good or for evil by the quality and quantity of aliment taken, its mode of preparation, and time and method of consuming. But little is found in the works on dermatology on the subject of diet in diseases of the skin, so that I shall not attempt to quote authorities, but shall only give suggestions as they have developed themselves in my own experience and study.

Beginning, then, with eczema, that "keystone in dermatology," as it has been termed, I will first call attention to the errors in diet which I constantly observe in those suffering from it during infant life. In infants at the breast, too frequent feeding is, I believe, a frequent source of this and other diseases; especially is it common for the mother to give the child the breast every time it cries, or is restless with the itching, which generally but aggravates the already existing digestive disorder; the time of feeding should be regulated, and the breast given not oftener than every two hours. But, again, the times of feeding may be correct, and the error may be in the quality of the milk from a faulty diet in the mother. In my inquiries, I have very generally found that mothers with eczematous children at the breast are in the habit of taking daily a larger or smaller amount of ale, beer, porter, and sometimes wine, or else large amounts of tea. Dyspepsia in the mother will very often cause eczema in her nursing child, and not infrequently rich chocolate, taken to "make milk," will disagree with the mother, and by means of her indigestion, influence badly the eczema in the child. I much

prefer milk or oat meal or other gruel for this purpose. Prolonged lactation is sometimes a cause, or at least, an impediment to the cure, of eczema; when the milk is poor in the mother, it is best to supplement it with cod liver oil, which even the smallest children often take with great avidity. Some of my best results in eczema in children have been in those in whom this nutrient medicine seemed indicated.

When the child with eczema passes beyond the nourishment of the breast, great care is required that its diet be correct. I need hardly allude to the impropriety of giving young children "a little of all that's going," as I see done every day among the poor, but unless the matter of the diet is inquired into, it will frequently be found that even children at the breast are fed from the table with the food of adults; especially do they often get a little tea or coffee, of which children are universally fond; these should, of course, be interdicted to all children, and they should be encouraged to use milk freely.

It is an error to believe that a child suffering from eczema is benefited by the administration of a large amount of nitrogenous nourishment or stimulants; the processes of assimilation are commonly at fault, and an excess of highly nitrogenized food but clogs the already overburdened kidneys, whose function it is to eliminate a large share of these elements. Recently, an infant, but a few months old, was brought to my office from Jersey City, dying, as I believe, from overfeeding, especially in this line. The physician who had previously seen the case, had advised large amounts of the juice of meat, repeatedly during the day, together with brandy, etc.; the child was laboring for breath, pulse full and throbbing, without any acute disease of the lungs or other organs, nor any disease save an eczema of moderate extent. The little patient died that night before any relief could be obtained, killed, as I truly believe, by the large amounts of nitrogenous elements which had been forced into its circulation. A moderate amount of beef juice, one or two teaspoonfuls, *once* daily, to a child of one or two years of age, is all that can be properly cared for, and in the majority of these cases, cod liver oil is far more serviceable.

It is also a constant error in the diet of these little patients with eczema to overload the stomach with pure starch compounds. Most of the children whom I am called on to treat with this eruption, are receiving large amounts of corn starch, barley, etc., in place of the milk which is their proper nourishment; the diet of these I usually change to wheat preparations, especially such as contain the whole wheat, and to such articles as Nestle's food.

These errors of diet are observed, undoubtedly, in a more glaring manner among the lower classes than among the more intelligent, and I think I may safely say that in hardly a single instance among my dispensary patients, during the past year, was the diet such as the most enlightened judgment would indicate that it should be for the age of the patient. Candy, cake, etc., of the most indigestible kinds, were constantly found in childrens' hands and mouths, and even cheese was occasionally taken from them. The diet of children with eczema should always be of the most nourishing kind, properly cooked, and taken at regular times, with little if anything between meals. I know of no restrictions other than such as are indicated by ordinary, good medical judgment. But it is a mistake to suppose that these things will take care of themselves; special inquiry must be made, special rules laid down, and hurtful articles interdicted.

Coming now to eczema in older life, the disease is undoubtedly one of debility, as is all disease, one of lowered vitality, and it will often be difficult to raise the vitality to the standard of health. But here, again, mistakes are very commonly made, for it is wrong to suppose that this can be done simply by increasing the quantity of the food taken, even in the line of nutritious elements; for digestion and assimilation are constantly at fault in eczema, and these require to be remedied first; ashes and cinders need to be removed before fresh and good coal can properly undergo combustion. It is far more important, therefore, that the food taken be properly and thoroughly appropriated to the system, than that organs already but partially fulfilling their functions should be taxed with new material. Therefore, in the earlier stages of more acute and severe eczema, the total amount of food may, with

advantage, be lessened, until the liberated organs regain a normal power, assisted by proper medication. These seem very homely matters to speak of before a learned body, but I have so very frequently seen patients crowded with food, beef juice, cod liver oil and stimulants, when the tongue was coated, the urine loaded, the secretion from the bowels scanty, and the skin dry and harsh, that I cannot forbear mentioning how frequently personal attention to those matters has afforded the greatest relief to the patient's feelings, as well as to the eczema or other cutaneous ailment. I am aware of the claims so ably advocated by Dr. Weir Mitchell, in regard to very great feeding, even over-feeding, in cases of greatly depressed vitality; but to have his method successful, it needs to be followed accurately in all its details, with the massage, electricity, rest, etc., and he admits that even then, all cases are not suitable for it; and, moreover, he distinctly says that he watches the urine* for signs of improper assimilation, and he is constantly on the alert, as a most intelligent physician, for signs of dyspepsia, etc. Moreover, I do not know that this process of excessive feeding and rest has ever been successfully tried in cases of eczema, or in any skin diseases.

I do not believe it best to cut off all meat in eczema and psoriasis, as some have recommended to do; I consider that in this country, at least, a fair amount of meat, once, or at the most, twice daily, is conducive to health, and is of benefit in eczema, acne and even psoriasis; this should be well cooked, but not overdone, and fried or boiled meat should be avoided.

It will be constantly observed, that patients, with certain diseases of the skin, as eczema, psoriasis and acne, avoid fat, this is especially true of those with the strumous or gouty habit well marked, and to insure a cure of the skin lesion and subsequent freedom from it, it will be necessary to see to it that this fault in the diet is corrected; at first this is difficult to accomplish, but it can be done in almost every instance, and I have frequently seen those who exhibited a repugnance to fat meat, become educated really to crave it.

*Fat and Blood and how to make them. Philadelphia, 1877, p. 81.

These patients may be encouraged to eat butter in abundance, not melted or fried with other substances, but fresh on bread, etc.; cream is also to be employed when possible, and cod liver oil or glycerin will often be required to supply a deficiency otherwise unreachd.

But in order to properly care for and assimilate this fatty food, it will often be necessary to increase the amount of oxygen inspired, and to accomplish this exercise in the open air must be insisted on. Diet and hygiene are, therefore, closely associated in the treatment of many diseases of the skin.

Perhaps the greatest error of diet, which is constantly committed by patients affected with cutaneous diseases, is in the too great use of sweet and starchy food. The appetite of many patients with skin diseases is faulty, and as there is little relish for ordinary food, the deficiency is made up by those articles which appeal more strongly to the taste; or with many there is the great fault of over-eating, especially in the line of sweet and starchy food, as obtained in desserts. Among those who are better to do, eating is so much of a social habit that the discrimination is seldom made between appetite and taste, and many continue to eat after a healthy appetite has been satisfied, and this additional sweet and starchy dessert, often in a very indigestible combination, is just so much of an extra tax upon the organs which minister to nutrition.

Therefore, as a rule, I inquire into these matters of diet, in patients with eczema and other skin diseases, and continually find the habitual use of articles which the patients themselves recognize to be injurious, but from which they have not the moral courage to abstain until so directed by the physician. Such are rich salads and side dishes, pickles, gravies, dressing of fowls, nuts, cheese, ice cream after dinner, etc.

Coffee and tea I do *not* consider harmful if taken in moderate and proper quantities, and at proper times; but this is a matter which requires attention, for some of the worst cases of eczema which I have ever been called on to treat, have been in those who consumed inordinate amounts of tea, taking it many times a day. I allow a cup of coffee and

milk in the morning, and one of tea at noon or night if desired, but not both; nor is it desirable to take the tea at night if a hearty dinner is eaten then. I never allow coffee to be drank after dinner by these patients.

In regard to the use of wines, ales, liquors, etc., I am very decided in the directions I give to patients with diseases of the skin—that is, each case is different, and should be prescribed for according to the indications present. The habitual use of any of them I consider to be prejudicial to at least nine out of ten of the cases which come under my care (which is synonymous with those affected with diseases of the skin), and I cut them off far, far oftener than I order them for those unaccustomed to their use; this is not, however, to be blindly done in every case, especially in those more or less dependent upon them, and occasionally they may serve a good service in treating skin cases, but these instances are few.

I do not, therefore, allow patients with syphilis in any of its stages to use any form of fermented or distilled liquors, believing with Renault that alcohol makes all these lesions worse, and predisposes the patient to the more severe ulcerative forms. I may here add a word or two in reference to other elements of diet and hygiene in syphilis. There is great danger, I find, of regarding syphilis simply as a series of lesions all due to the action of the specific poison, without remembering that many other elements are to be taken into consideration in each particular case. Ofttimes mercury and iodide of potassium seem to have almost no control over the lesions, or even to do harm; in many cases I find other causes, such as dietary and hygienic acting with great power, and hindering the cure. I therefore urge that very much in this paper pertains to syphilitic patients as well as to those with acne, eczema, psoriasis, etc.

I generally withhold fermented and distilled liquors also from eczema patients, preferring, if the appetite and strength require it, to stimulate with the compound tincture or extract of bark, with nux vomica or strychnine, and quinia, or the mineral acids and iron.

In acne, I very seldom, if ever, allow my patients any

spirituous or fermented drinks, and interdict especially ale, porter, sweet wines, cider, etc. One of the most obstinate cases of *acne rosacea* which I have ever had to manage was in the person of an elderly gentleman, who persisted, for a time, in drinking wine, mainly sherry and claret; after a while he was persuaded to desist from them, when his skin lesion yielded promptly to remedies which before were inefficacious, and his face has now remained free from eruption for a number of years. Another patient, a lady, with a very severe and disfiguring eruption of *acne indurata*, had been advised cod liver oil, which she took with ale three times daily, with a constant increase in the eruption; subsequently cod liver oil without the ale was well borne and the patient recovered.

The same reasons which lead me to keep these substances from *acne* patients cause me to endeavor to hinder patients with *psoriasis* from their habitual, much more from their excessive, use—namely, patients with both these affections all acknowledge that there is more or less flushing of the cutaneous surface following their use, and oftentimes a period of subsequent depression and drowsiness. Now, these are both marks of errors of digestion or assimilation, and as such should be avoided; moreover, the larger share of patients notice that an excessive use of fermented liquors is always followed by an increase in the eruption. Of this I have had some striking examples, and Renault, in the thesis before alluded to, cites a number of cases which show that alcohol causes a greater development of the disease, and more active phenomena of itching, etc. Renault shows that the physiological action of alcohol is such as to predispose, more or less, to cutaneous diseases. 1. Because it is eliminated to the skin. 2. Because a small dose produces a general nervous excitation, and a large dose depression. 3. Because of its diminishing the amount of carbonic acid exhaled and lowering the temperature; and, 4. Because of its tendency to produce fatty changes in the tissues. He gives a case of *hydroa* where bullæ had developed twenty times within seven years, each attack almost always succeeding alcoholic abuse.

Soup is an article of diet in very common use, and requires

consideration. Many of my patients with acne and other skin diseases say that the face is always much more flushed after taking soup, and quite a proportion of them have themselves learned to avoid it. I almost always interdict its use in acne, and frequently in other affections of the skin.

It is popularly supposed, and believed by many physicians that fish is injurious and should be restricted in skin diseases; this is founded upon the fact before alluded to, that in certain individuals some varieties of fish, especially shell-fish, call forth an eruption of erythema or urticaria. I have not found fish to be injurious in such affections as acne, eczema and psoriasis; indeed, unless there is some peculiar idiosyncrasy against fish, I constantly order it as an article of diet to take the place of meat in those to whom this restriction is required.

It would take much more time than I intend to occupy even to briefly allude to many articles of diet which have more or less effect upon certain of this class of diseases, and to give the reasons therefor, and in closing this portion of my subject I can but remind you of the principles which are to guide one in giving directions about diet.

Indigestion must be *looked for*, and in some of its forms it will be found to be very commonly present. I need hardly remind this audience that indigestion, or, more properly, imperfect digestion, embraces a much larger field of sytemic derangement than is often recognized as such, and has to do with the entire processes of assimilation and disintegration. That is, there may be none of the ordinary signs of stomach disorder, such as pain in the epigastrium, flatulence, acid eructations, etc., and yet there may be very serious failure in the process of converting food into tissue and energy, and of removing the effete products of the same. Of these I cannot now particularly speak, having recently developed the subject elsewhere very fully,* but I wish to insist that every article of food which may disturb these processes must be avoided in these diseases, and to accomplish this much care will often be required; and I wish to impress the fact that

*On the Recognition and Management of the Gouty State in Diseases of the Skin. Read before the American Medical Association, June 7, 1877. *American Practitioner*, November, 1877.—Reprint, G. P. Putnam's Sons, New York, N. Y.

these dietary errors are far more common than they are thought to be, and are far more productive of skin lesions than is commonly acknowledged.

In regard to the other side of the question, it is often of importance to add to the diet as usually taken, in certain diseases of the skin. I have already alluded to the subject of the use of fatty matter, especially the fat of roast beef and mutton, and of chops and steaks, and also to the necessity oftentimes of supplementing these with cod liver oil or glycerin in strumous and gouty subjects. Indeed it is unwise to cut off largely the carbonaceous elements, as is done when we limit the starch and sugar, without supplying its place by a sufficient quantity of the same in some more digestible form.

Some care is required in executing this order "to use fat largely" by those unaccustomed to it, because there is danger of the production of the state or group of symptoms commonly known as "bilious," as is very frequently seen in those who begin cod liver oil in too large a dose. Alkalies can often be given with much advantage to counteract this, and when I order milk for adults, as I do a great deal, I often direct a little acetate of potassa, fifteen to twenty grains, or ten to twenty drops of liquor potassæ, to be taken in each tumblerful. I regret that I have no experience which I am able to record of the use of the malt extracts in skin diseases; they are frequently prescribed in these affections, but I am unable to give any particular indications for their use, other than those suggested by a run-down condition of the patient. I have had some very good results with glycerin internally in papular and punctate acne.

There is another addition to the diet of very many patients affected with skin disease, especially acne, eczema and psoriasis, which I consider to be very important; and that is found in the truly nutritive portion of wheat which is so commonly taken out and thrown away. I allude to the use of preparations containing the whole of the wheat kernel,* and of these there is none, in my estimation, equal to

*The ordinary Graham flour does not fulfill all the requirements, because in the early siftings, to remove the coarser portions of the siliceous coat, much of the gluten and phosphates are also taken away, adhering to the former; moreover, this is not always well borne, because the portions of unground wheat irritate the stomach and intestines.

what is known as the cold-blast attrition flour of whole wheat. In this the hard, silex coat is first removed and comes off alone, leaving all the nutritive elements which are then ground into a fine flour; this contains all the phosphates as well as all the gluten of the wheat, and is, I believe, many times as nutritious as the ordinary very fine white flour, as commonly used. The bread made from it is quite dark, but is very palatable, and every one of the many who are now using it at my direction is fond of it, especially children. I invariably place patients upon it who have any failure in the nutrition of the hair, and I believe that it has assisted me much in the treatment of these cases. I use this also with good results in all patients where any nervous phenomena exhibit themselves, and in those who are of constipated habit; sometimes it alone suffices to restore regularity of action to the bowels. I have employed it for about two years, and order it on general principles to the children under my care, because I believe that it best represents the food which nature designed should be prepared from the whole wheat kernel.*

I also encourage largely the use of crushed wheat for breakfast for the same reasons, preferring it in the main to oat meal in skin diseases. My impression is that there is some truth in the popular opinion that oat meal is rather "heating," although I cannot well define exactly what is meant by the latter term; it does, however, act unfavorably in some cases of acne and eczema. Both cracked wheat and oat meal should be much more thoroughly boiled than is commonly done; it is well to boil them over night, and again in the morning.

Time and space forbid my entering at all fully into the other elements of diet, as indicated in my definition of it—namely, the regulation of the quantity of food and drink taken, its mode of preparation, and time, and method of consumption;

*The flour that I have reference to is quite different from the ordinary Graham flour; the agents for it in New York are the Health Food Company, 76 Fourth Avenue. I give the name and address because it is essential, I think, to get just the right article, and, as far as I can learn, after considerable inquiry, there is no other preparation which answers the same end, for the reasons stated in the paper. It is not an advertised nostrum, but simply wheat ground in a particular manner; nothing more, nothing less.

but I would like to throw out a few practical thoughts which are matters of every day consideration in my office. I have already spoken somewhat of the quantity; this must neither be too small nor too large; a *healthy* appetite and *good* judgment are the best guides, but unfortunately every one does not possess one or both of these, and the physician should endeavor to supply the lack; over-eating I consider the fault in by far the larger proportion of cases.

A large field of thought is open in regard to the mode of preparation of foods, in regard to which the greatest ignorance exists, but which we cannot at all enter upon at present; suffice to say, patients with skin lesions should not take their food fried, nor too well cooked in any way; high seasoning I decidedly object to for these patients.

The time of taking food is by no means an unimportant matter, and regularity of meals is very necessary both to the restoration to health of diseased tissues, and to the maintenance of the same, and yet I continually find very grave errors committed by very intelligent persons; this is a matter I very frequently speak of.

It may seem trivial to speak of the method of consuming food, but unless this is attended to by the physician a very common error may be persisted in, which may baffle many good efforts in other directions. I allude to the very common American habit of eating fast, and of imperfectly masticating the food. The process of digestion undoubtedly commences in the mouth, and an imperfect performance of the work allotted to this portion of the digestive tract must throw extra work on other portions, and results in imperfect digestion. I continually am obliged to caution skin patients in regard to this.

Many inadvertently take large amounts of water or other liquid with their meals. Very cold water is especially bad, but any fluid beyond a very moderate amount certainly dilutes the gastric juice, and impairs digestion. Nor is it well to take the tumblerful, as many do, just at the close of the meal; the result is the same; water or fluid taken too soon afterwards must and does also act prejudicially. A common direction of mine is to diminish the quantity of fluid taken

at the meal by one-half—one cup of tea where too were taken ; half a goblet of water where one was drunk.

Some of these suggestions may seem useless to my hearers, but I am assured of the truth and importance of all the matters I have mentioned, from a not inconsiderable practice among those who are habitually suffering from some of the elements of imperfect digestion and the skin diseases dependent thereon, all of which oftentimes result from dietary errors as understood in my definition.

There are, of course, other causes of these difficulties, which belong rather to the subject of hygiene, such as mental strain, worry, etc.; but those I have mentioned are so easily remedied that I cannot but endeavor to impress upon you the importance of attending to them, believing that if it is habitually done, it will be much easier to remove many diseases of the skin. It must be remembered that in a chronic state we must use chronic remedies, and also that the diet is a chronic factor for good or for evil long after the patient has ceased to use our external or internal remedies.

I have already consumed so much of your time that I shall have to be very brief in regard to the subject of hygiene in cutaneous maladies; and the most I can do on the present occasion is to impress the fact that every element which can conduce to the general health and vigor of the patient should be considered in connection with those afflicted with diseases of the skin.

First in importance I place exercise. And explicit instructions should be given to every one in regard to this; for the judgment of few patients will lead them to employ this agent properly or sufficiently. No spasmodic or irregular exercise will suffice; but steady, daily action of the whole frame can and certainly does conduce to the restoration to health of diseased skin.

Bathing ranks next in importance, and the daily cold or tepid sponge bath on rising, with good, earnest friction thereafter, is a common prescription of mine to those who can bear it. If this cannot be done, mildly alkaline warm baths twice or thrice weekly, at night, conduce much to the perfect

interchange of tissue elements, and often help a purely localized skin disease amazingly.

Proper rest and sleep should never be neglected by the physician; for some patients are always in such a tearing hurry that their systems never recover from the shock of one day before the next is upon them; mental anxiety and nervous over-strain are undoubtedly the causes of the beginning and continuance of many skin diseases. Ventilation and sunlight are indispensable agents to recovery, and should not escape the careful physician's attention.

Finally, no item which can conduce to the physical welfare of a patient is beneath the notice of the medical man who would successfully treat diseases of the skin. Diet and hygiene represent a large share of the elements of human existence, and are often, or, rather, always, more potent for health or ill-health than what are more commonly known of medicines; and what is true of the general economy is eminently true in regard to one of the most important emunctories of the body, namely, the skin.

"Of Service to Every Practitioner."

Archives of Dermatology:

A Quarterly Journal of Skin and Venereal Diseases.

L. DUNCAN BULKLEY, A. M., M. D., Editor and Proprietor,

Physician to the Skin Department, Demilt Dispensary, New York; Attending Physician for Skin and Venereal Diseases, at the Out-Patient Department of the New York Hospital, etc.

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